

Florida Department of State
Division of Corporations
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L14000013435

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : PADULA BENNARDO LEVINE, LLP
Account Number : I20160000061
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
405 W PINE STREET, LLC

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Corporate Filing Menu

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D. SCOTT

SEP 27 2016

(((H16000238729 3)))

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

405 W PINE STREET, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/24/2014 and assigned Florida document number L14000013435.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

365 SE 6th Ave., Unit 307

Delray Beach, FL 33483

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

365 SE 6th Ave., Unit 307

Delray Beach, FL 33483

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Robert Selame

New Registered Office Address:

365 SE 6th Ave., Unit 307

Enter Florida street address

Delray Beach

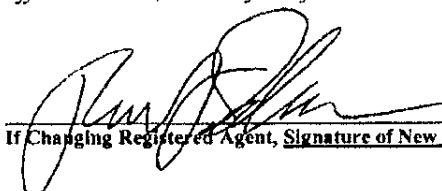
City

, Florida 33483

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

(((H16000238729 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Benjamin Franc	1200 Scotia Drive, #505	<input type="checkbox"/> Add
		Hypoluxo, FL 33462	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Robert Selame	365 SE 6th Ave., Unit 307	<input checked="" type="checkbox"/> Add
		Delray Beach, FL 33483	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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